

## Kansas Propane Safety and Licensing

## Class 3 – Cylinder Transport License \$100 Per Truck

Permits holder to operate cylinder delivery service

Name of Applica	ant:				Social Security	Number:	
Full Company N (include DBA)							
Business Street Street/City/Sta							
Business Mailing (if different from							
Business Teleph	none:	( )		Federal ID	Number:		
Insurance Comp	any Name:					T	
Policy Number				Expir	ation Date:		
Are you a common carrier? Yes  No  If yes, KCC No.: ICC No  Total number of mobile equipment that will operate in Kansas: Belivery Trucks: Semi-Transports:  List the terminal(s) this mobile equipment is dispatched from: (if different from above)							
				nom. (n an	iereni nom abo	ve)	
Terminal Locat	tion	• •		e Number	Terent from abo	Terminal Manager	
	tion			•	Terent nom abo	<u> </u>	
	tion			•	Terent nom abo	<u> </u>	
	tion			•	Terent morn abo	<u> </u>	
	tion			•	Terent nom abo	<u> </u>	
	tion			•	Terent morn abo	<u> </u>	
			Phon	e Number		<u> </u>	
Terminal Local	ator's Name	e:	Phon	e Number		Terminal Manager	
Terminal Local Safety Coordina Read and initial	ator's Name	e: ng:	Phon	e Number	Office Pho	Terminal Manager	
Safety Coordina  Read and initial  I have  I unde	the following read the K	e:	Phone	e Number	Office Pho	Terminal Manager	
Safety Coordina  Read and initial  I have  I unde to the  I agree have a	the following read the Kansas State that all petitended or	e: ansas statutes this license is ate Fire Marsha ersonnel are re will attend a si	Phone and rules that non-transferabal's Office immeduired to attende	regulate the le and any ediately.	Office Pho	Terminal Manager  one No	

A license will not be issued unless all above questions are answered.

DO NOT WRITE IN SPACE BELOW							
License No.		Expiration Date:		Date Issued:		Processed by:	

	to comply with the rules shall be cause for		
Signed: <sub>.</sub>			<u> </u>
Printed N	Name:		
Title:		Date:	· · · · · · · · · · · · · · · · · · ·
Mail to:	Kansas State Fire Marshal's Office 700 SW Jackson St, Suite 600 Topeka KS 66603-3714	Phone: (785) 296-3401 Fax: (785) 296-0151	

Include check payable to: Kansas State Fire Marshal's Office

(Note: This app needs to include training requirement verification.)